

DECLARATION FOR PATENT APPLICATION

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship is as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled ENDOGLUCANASES, the specification of which

\_\_\_\_\_ is attached hereto.

X was filed on April 18, 2001 as U.S. Application Serial No. 09/914,543 (the "Application") (Docket No. DIVER1150-5


I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability of the subject matter of the Application as defined in Title 37, Code of Federal Regulations ("C.F.R."), § 1.56.

With respect to the Application, I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

_____ (Application Serial No.)	_____ (Filing Date)
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With respect to the Application, I hereby claim the benefit under 35 U.S.C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of the application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability of the subject matter of the



09914543.011702

Application as defined in Title 37, C.F.R., Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of the Application:

(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
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I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

COUNTRY	APPLICATION NO.	FILING DATE	PRIORITY CLAIMED
<u>US</u>	<u>PCT/US97/08793</u>	<u>May 22, 1997</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor: David E. Lam

Inventor's signature: 

Date: 1/14/2002

Residence: Carlsbad, California CA

Citizenship: USA

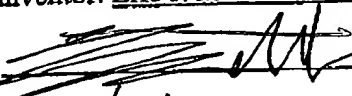
Post Office Address: 3261 Avenida Anacapa  
Carlsbad, California 92009



204110-01702

2-00

Full name of second inventor: Eric J. Mathur

Inventor's signature: 

Date: 1/16/01

Residence: Carlsbad, California

CA

Citizenship: USA

Post Office Address: 2654 Galicia Way  
Carlsbad, California 92009

Gray Cary\GT\6274119.1  
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"Not Signed"

NATIONAL CHAPTER - US

Annex US.III, page 2

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (CONTINUED) (Includes Reference to PCT International Applications)				ATTORNEY'S DOCKET NO. DIVER1150WO1	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:					
U.S. APPLICATIONS			STATUS (MARK ONE)		
U.S. APPLICATION NUMBER		U.S. FILING DATE		PATENTED	PENDING
08/651,572		05/22/96		X	
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO.		PCT FILING DATE		U.S. SERIAL NUMBERS ASSIGNED (if any)	
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration no.) <u>USPTO Customer Number 28213</u>					
SEND CORRESPONDENCE TO: Lisa A. Haile, Reg. No. 38,347 GRAY CARY WARE & FREIDENRICH 4365 Executive Drive, Suite 1600 San Diego, CA 92121-2189				DIRECT TELEPHONE CALLS TO: Lisa A. Haile Telephone: 858/677-1456 Fax: 858/677-1465	
1-00201	FULL NAME OF INVENTOR	FAMILY NAME <u>LAM</u>	FIRST GIVEN NAME <u>David</u>	SECOND GIVEN NAME <u>E.</u>	
	RESIDENCE & CITIZENSHIP	CITY <u>Harbor City</u>	STATE OR FOREIGN COUNTRY <u>California CA</u>	COUNTRY OF CITIZENSHIP <u>USA</u>	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>1518 West 249<sup>th</sup> Street</u>	CITY <u>Harbor City</u>	STATE & ZIP CODE/COUNTRY <u>California 90710</u>	
2-002	FULL NAME OF INVENTOR	FAMILY NAME <u>MATHUR</u>	FIRST GIVEN NAME <u>Eric</u>	SECOND GIVEN NAME <u>J.</u>	
	RESIDENCE & CITIZENSHIP	CITY <u>Carlsbad</u>	STATE OR FOREIGN COUNTRY <u>California CA</u>	COUNTRY OF CITIZENSHIP <u>USA</u>	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>2654 Galicia Way</u>	CITY <u>Carlsbad</u>	STATE & ZIP CODE/COUNTRY <u>California 92009</u>	
203	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
___ ADDITIONAL INVENTOR INFORMATION ATTACHED I hereby declare that all statements made herein are of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any issuing thereon.					
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNATURE OF INVENTOR 203	
DATE:		DATE:		DATE::	

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY  
(Includes Reference to PCT International Applications)ATTORNEY'S DOCKET NO.  
DIVER1150WO1

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I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ENDOGLUCANASES

the specification of which (check only one item below):

- ☐ is attached hereto.
- ☐ was filed as United States application  
Serial No. \_\_\_\_\_  
on \_\_\_\_\_  
and was amended  
on \_\_\_\_\_ (if applicable).
- ☒ was filed as PCT international application  
Number US99/08793  
on 22 May 1997  
and was amended under PCT Article 19  
on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefit under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

## PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (If PCT indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY  
(Includes Reference to PCT International Applications)ATTORNEY'S DOCKET NO.  
DIVER1150WO1

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ENDOGLUCANASES

the specification of which (check only one item below):

- ☐ is attached hereto.
- ☐ was filed as United States application  
Serial No. \_\_\_\_\_  
on \_\_\_\_\_  
and was amended  
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COUNTRY (if PCT indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

**COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY**  
 (CONTINUED) (Includes Reference to PCT International Applications)

 ATTORNEY'S DOCKET NO.  
 DIVER1150W01

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS			STATUS (MARK ONE)		
U.S. APPLICATION NUMBER	U.S. FILING DATE		PATENTED	PENDING	ABANDONED
08/651,572	05/22/96		X		
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration no.) **USPTO Customer Number 28213**

 SEND CORRESPONDENCE TO: Lisa A. Haile, Reg. No. 38,347  
 GRAY CARY WARE & FREIDENRICH  
 4365 Executive Drive, Suite 1600  
 San Diego, CA 92121-2189

 DIRECT TELEPHONE CALLS TO:  
 Lisa A. Haile  
 Telephone: 858/677-1456  
 Fax: 858/677-1465

201	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
		LAM	David	E.
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Harbor City	California	USA
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		1518 West 249 <sup>th</sup> Street	Harbor City	California 90710
202	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
		MATHUR	Eric	J.
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Carlsbad	California	USA
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		2654 Galicia Way	Carlsbad	California 92009
203	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

**ADDITIONAL INVENTOR INFORMATION ATTACHED**

I hereby declare that all statements made herein are of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE:	DATE:	DATE: